



20427 U.S. PTO

032204

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.: CS24682RL	
		First Inventor: James P. Phillips	
		Title: FLEXIBLE TEST CABLE	
		Express Mail Label No.: EL 977214497 US	

APPLICATION ELEMENTS <small>(see MPEP chapter 600 concerning utility patent application contents)</small>	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450
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<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></p> <p>2. <input type="checkbox"/> Applicant claims small entity status <small>See 37 CFR 1.27</small></p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <u>14</u>] <small>(preferred arrangement set forth below)</small> -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R & D -Reference to sequence listing, a table, or computer program listing appendix -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>4</u>]</p> <p>5. Oath or Declaration [Total Sheets <u>3</u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p style="margin-left: 40px;">b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small></p> <p style="margin-left: 80px;">i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CFR) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies</p>
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ACCOMPANYING APPLICATION PARTS
<p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure <u>3</u> Copies of IDS Statement (IDS)/PT-1449 Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p>

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in- Part (CIP) of prior application No. _____

Prior application information: Examiner: _____ Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number <u>20280</u> or <input type="checkbox"/> Correspondence address below					
Name _____					
Address _____					
City _____		State _____		Zip Code _____	
Country _____		Telephone _____		Fax _____	
Name <u>Sylvia Chen</u>		Registration No. _____		39,633	
SIGNATURE <u>Sylvia Chen</u>				Date <u>22MAR2004</u>	

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<div>FEE TRANSMITTAL</div> <div>Patent fees are subject to annual revision</div> <div><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div>		Complete if Known					
		Application Number					
		Filing Date		March 22, 2004			
		First Named Inventor		James P. Phillips			
		Examiner Name					
Group Art Unit							
TOTAL AMOUNT OF PAYMENT		(\$ 900.00)		Attorney Docket No. CS24682RL			
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)			
<div><input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None</div> <div><input checked="" type="checkbox"/> Deposit Account:<div>Deposit Account Number 502117</div><div>Deposit Account Name Motorola, Inc.</div></div> <div>The Director is authorized to: (check all that apply)</div> <div><input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments</div> <div><input type="checkbox"/> Charge any additional fee(s) during the pendency of this application</div> <div><input type="checkbox"/> Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.</div>				3. ADDITIONAL FEES			
FEE CALCULATION				Fee Calculation Table			
1. BASIC FILING FEE				Fee Calculation Table			
2. EXTRA CLAIM FEES				Fee Calculation Table			
SUBMITTED BY				Complete (if applicable)			
Name (Print/Type)		Signature		Registration No.		Date	